

Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

FILED
U.S. DISTRICT COURT
DISTRICT OF NEBRASKA

2023 APR -7 AM 10:37

OFFICE OF THE CLERK

UNITED STATES DISTRICT COURT

for the

District of Nebraska

Division

Case No.

8: 23CV134

(to be filled in by the Clerk's Office)

Silvester Juanes

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

OneWorld Community Health

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Jury Trial: (check one) ☐ Yes ☐ No

COMPLAINT FOR EMPLOYMENT DISCRIMINATION

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

| | |
|--------------------|----------------------------------|
| Name | <u>Silvester Juanes</u> |
| Street Address | <u>10134 Grand Plaza</u> |
| City and County | <u>Omaha, Douglas</u> |
| State and Zip Code | <u>Nebraska, 68134</u> |
| Telephone Number | <u>(308) 370 2687</u> |
| E-mail Address | <u>silvesterjuanes@gmail.com</u> |

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

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Defendant No. 1

| | |
|----------------------------------|---|
| Name | OneWorld Community Health Centers, Inc. |
| Job or Title <i>(if known)</i> | |
| Street Address | 4920 S. 30 th St. |
| City and County | Omaha, Douglas |
| State and Zip Code | Nebraska, 68107 |
| Telephone Number | (402) 502-8851 |
| E-mail Address <i>(if known)</i> | |

Defendant No. 2

| | |
|----------------------------------|--|
| Name | |
| Job or Title <i>(if known)</i> | |
| Street Address | |
| City and County | |
| State and Zip Code | |
| Telephone Number | |
| E-mail Address <i>(if known)</i> | |

Defendant No. 3

| | |
|----------------------------------|--|
| Name | |
| Job or Title <i>(if known)</i> | |
| Street Address | |
| City and County | |
| State and Zip Code | |
| Telephone Number | |
| E-mail Address <i>(if known)</i> | |

Defendant No. 4

| | |
|----------------------------------|--|
| Name | |
| Job or Title <i>(if known)</i> | |
| Street Address | |
| City and County | |
| State and Zip Code | |
| Telephone Number | |
| E-mail Address <i>(if known)</i> | |

C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is

| | |
|--------------------|---|
| Name | Oneworld Community Health Centers, Inc. |
| Street Address | 4920, S. 30 th St. |
| City and County | Omaha, Douglas |
| State and Zip Code | Nebraska, 68107 |
| Telephone Number | (402) 502-8851 |

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to *(check all that apply)*:

- ☒ Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

- ☐ Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)

- ☐ Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)

- ☐ Other federal law *(specify the federal law)*:

- ☐ Relevant state law *(specify, if known)*:

- ☐ Relevant city or county law *(specify, if known)*:

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes *(check all that apply)*:

- ☐ Failure to hire me.
- ☒ Termination of my employment.
- ☒ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☐ Unequal terms and conditions of my employment.
- ☐ Retaliation.
- ☐ Other acts *(specify)*: _____

(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)
February, 2022

C. I believe that defendant(s) *(check one)*:

- ☐ is/are still committing these acts against me.
- ☒ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my *(check all that apply and explain)*:

- ☒ race Mexican
- ☒ color Brown
- ☐ gender/sex _____
- ☐ religion _____
- ☐ national origin _____
- ☐ age *(year of birth)* _____ *(only when asserting a claim of age discrimination.)*
- ☐ disability or perceived disability *(specify disability)* _____

E. The facts of my case are as follows. Attach additional pages if needed.

I had been yelled at by employee Tay Orr who stated that she was tired of Mexicans coming to America and taking jobs. She stated that Mexicans should speak English because this is America. She further stated that the position of Chief Diversity and Inclusion Officer for which I had applied to was a waste of money. I was given two interviews for the position I had applied to which would have been a promotion for me from my current project manager position. After my first interview, I was called to the HR office and informed that an investigation was being launched on me because I had allegedly made some people uncomfortable. The HR Director cited that I had asked staff how their children were doing and had invited staff out to lunch which was common practice. One hour before my final interview I was called into the HR office and terminated. When asked why HR director stated that it was because I had asked staff about their kids and out to lunch. I shared I had just had a performance review and no one had mentioned this. He stated it did not matter, he was not going to debate with me, and that I needed to leave before he had me escorted out. That was it. I filed an EEOC complaint and received a right to sue letter.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

Received a Right to Sue letter January, 5, 2023.

- B. The Equal Employment Opportunity Commission (check one):

☐ has not issued a Notice of Right to Sue letter.

☒ issued a Notice of Right to Sue letter, which I received on (date) 01/05/2023.

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

☒ 60 days or more have elapsed.

☐ less than 60 days have elapsed.

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

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I ask the court to order monetary damages as I have not been able to find employment since I was terminated, pain and suffering as I have been in therapy for this, and loss of current and future wages.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 4/4/2023

Signature of Plaintiff



Printed Name of Plaintiff Silvester Juanes

B. For Attorneys

Date of signing: _____

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Street Address _____

State and Zip Code _____

Telephone Number _____

E-mail Address _____

10134 Grand Plz 24
Omaha, NE 68134

OMAHA NE 680

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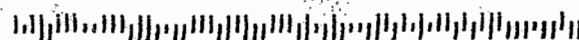
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U.S. DISTRICT COURT

Federal Building
111 South 18th Plaza, Suite 1152
Omaha, NE 68102

68102-132277



Silvestre Suarez



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